# PATERNITY BY AFFIDAVIT APPENDIX



#### TABLE OF CONTENTS

# **Title 10** Support Establishment and Modification **Chapter C** Paternity by Affidavit Appendix

### Revised August 27, 2002

	<u>Page</u>
470-3880, Birth Certificate Request	1
470-3901, Paternity Affidavit Request	2
588-0032, Recision of Paternity Affidavit	3
588-0037, Paternity Affidavit	4
588-0298 (470-3194), Confidential Verification of Birth	5
RC-0068, Oral Information About Paternity Establishment	7

#### 470-3880, Birth Certificate Request

Purpose Use form 470-3880, Birth Certificate Request, to request a certified

copy of a birth certificate from the Bureau of Vital Records.

Source Enter a "Y" in the REQT BIRTH CERT field on the CHILD screen to

generate the form for the first time, or an "R" to regenerate it.

Complete this form if you need to request a certified copy of a birth

certificate. Assess the need to request a certified copy on a case-by-

case basis.

If you generate the form from the CHILD screen, ICAR automatically enters some of the data, and you must enter the rest. If you generate

the form manually, you must enter all of the data. The CSRU

supervisor must sign this form.

Distribution Send the original of this form to the Bureau of Vital Records and

maintain a copy in the case file.

Data ICAR enters the following information. You must enter the

information for manually generated forms:

♦ Child's full name, sex, and date of birth

♦ Father's full name

♦ CSRU address

Always enter the following information:

- ♦ City and county of children's birth
- ♦ Mother's full maiden name
- ♦ CSRU supervisor's name
- Reason for request

#### 470-3901, Paternity Affidavit Request

Purpose Use form 470-3901, Paternity Affidavit Request, to get a copy of a

paternity affidavit from the Bureau of Vital Records.

Source Generate this form from the FORMVIEW screen.

Complete this form when you need to request a copy of a paternity

affidavit from the Bureau of Vital Records, but only after verifying that

Central Office does not have a copy of the Paternity Affidavit.

All paternity affidavits processed <u>after</u> September 16, 1994, are stored electronically on ICAR, and hard copies of those paternity affidavits

are kept in Central Office by Operations staff.

Because Central Office did not receive copies of paternity affidavits processed <u>before</u> September 16, 1994, this form may be needed in rare cases to obtain a copy directly from the Bureau of Vital Records.

Distribution Send the original of this form to the Bureau of Vital Records. Keep a

You must enter all of the data in this form.

copy in the case file.

Data Enter the following information:

♦ Child's full name, date of birth

- ♦ Mother's maiden name
- ♦ Father's full name
- CSRU worker name, ID and phone numbers, and address
- ♦ City, county, and state of child's birth
- ◆ Case number

#### 588-0032, Recision of Paternity Affidavit

Purpose Form 588-0032, Recision of Paternity Affidavit, is issued by the

Bureau of Vital Records and is used by the mother or alleged father to

rescind a previously signed Paternity Affidavit.

Supply A mother or alleged father can get this form from CSRU offices,

county registrar or recorders' offices, or the Bureau of Vital Records.

Completion A mother or alleged father completes this form to rescind a paternity

affidavit. This form must be notarized. CSRU does not complete any

part of this form.

Distribution Once this form is completed and notarized, the mother or alleged

father must submit it to the county registrars or recorder's office or to the Bureau of Vital Records with the required fee within the earlier of:

• 60 days after the latest notarized signature on the *Paternity* 

Affidavit.

• Entry of a court order regarding the child.

#### 588-0037, Paternity Affidavit

Purpose Form 588-0037, *Paternity Affidavit*, is issued by the Bureau of Vital

Records and is used to register paternity for a child born out of wedlock. After July 1, 1993, filing this affidavit with the Bureau of

Vital Records legally establishes paternity.

Source A mother or alleged father can get this form from CSRU offices,

county registrar or recorders' offices, hospitals, birthing centers, or the

Bureau of Vital Records.

Completion The mother and alleged father prepare and sign this form when an

alleged father voluntarily acknowledges paternity. This form must be

notarized.

CSRU does not complete any fields on this form. A notary public in

the office may be asked to notarize the parents' signatures.

Distribution The parents or the hospital or birthing center sends the original to the

Bureau of Vital Records for registration.

#### 588-0298 (470-3194), Confidential Verification of Birth

Purpose Use form 588-0298, Confidential Verification of Birth, to get

verification of a child's birth information from the Bureau of Vital

Records.

Source Enter a "Y" in the VERIFY BIRTH INFO field on the CHILD screen to

generate this form for the first time, or an "R" to regenerate it. The

ICAR form number for this form is 470-3194.

Completion Complete this form if you need to verify information regarding a

child's birth. Complete only Part 1 of this form.

When you generate the form from the CHILD screen, ICAR automatically enters some of the data, and you must enter the rest. If

you generate the form manually, you must enter all of the data.

The Bureau of Vital Records completes Part 2 and sends the form back to CSRU. Part 2 indicates one of the following:

• The information that was provided on the form is correct;

- No record was located with the information provided; or
- Some of the information provided on the form was incorrect and the Bureau of Vital Records has noted the corrected information directly on the form.

The form with Part 2 completed is all you will get back. You will not receive a copy of the actual birth certificate.

If any of the information in Part 1 is missing or is incorrect, the Bureau of Vital Records notes that on Part 1.

Send the original of this form to the Bureau of Vital Records.

Maintain a copy in the case file.

Distribution

Data

ICAR enters the following information. You must enter the information for manually generated forms:

- ♦ Child's full name, sex, date of birth
- ♦ Mother's first and middle name (you must complete this information in a caretaker case)
- ♦ Father's full name
- ♦ CSRU worker name, title, phone number and address

You enter the following information:

- City and county of children's birth
- ♦ Mother's maiden name
- ♦ CSRU worker's facsimile (fax) number

**Note:** The form can be completed without the city and county of the child's birth or the mother's maiden name. However, this will delay processing, since this information helps the Bureau of Vital Records locate the birth record more easily.

#### RC-0068, Oral Information About Paternity Establishment

Purpose Use the Oral Information About Paternity Establishment desk aid to

guide you through the information that must be given orally when a

customer requests or completes a Paternity Affidavit.

Source The desk aid is available only through this appendix.

Completion Use this desk aid when a customer calls or comes into the office and

requests a Paternity Affidavit or completes a Paternity Affidavit.



## STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES

JESSIE K. RASMUSSEN, DIRECTOR

August 27, 2002

#### **GENERAL LETTER NO. 10-C-AP-17**

ISSUED BY: Bureau of Collections,

Division of Child Support Recovery, Case Management, and Refugee Services

SUBJECT: Employees' Manual, Title 10, Chapter C, *PATERNITY BY AFFIDAVIT*,

APPENDIX, Title page, revised; Contents (page 1), revised; pages 1 through 7,

new; and the following new forms:

470-3880 Birth Certificate Request
470-3901 Paternity Affidavit Request
588-0032 Recision of Paternity Affidavit

588-0037 Paternity Affidavit

588-0298 Confidential Verification of Birth

RC-0068 Oral Information About Paternity Establishment

#### **Summary**

This appendix is renamed and revised to reflect the change in contents of Chapter 10-C, **PATERNITY BY AFFIDAVIT**. This revision incorporates forms and instructions that were previously located in 10-F-Appendix, which is now obsolete.

The material previously contained in X-C-Appendix, *CHILD SUPPORT RECOVERY APPENDIX*, is to be moved to 10-I-Appendix, *ADMINISTRATIVE ESTABLISHMENT APPENDIX*, or is now obsolete.

#### **Effective Date**

Immediately.

Page

#### **Material Superseded**

Remove the entire Chapter C Appendix from Employees' Manual, Title X, and destroy it. This includes the following:

Date

<u> </u>	<u>=</u>
Title page	June 10, 1997
Contents (page 1 and 2)	June 10, 1997
470-2981	12/92
9, 10	February 23, 1993

470-2982	12/92
470-2157	7/92
11-14	June 10, 1997
470-2983	11/96
470-2871	6/91
470-2155	7/92
15-17	June 11, 1991
470-2159, 470-2217	6/91
18	October 3, 1995
470-2186	6/91
19, 20	June 11, 1991
470-2984	09/96
20a-20c	February 23, 1993
470-2167	7/92
21-26	September 22, 1992
470-2164	6/91
CS-3104-0	4/91
470-2946	7/92
470-2945	7/92
26a, 27	July 5, 1995
470-3181	02/95
28, 29	September 22, 1992
470-1922, 470-1923	11/96
30, 31	February 23, 1993
470-1924	11/96
32, 33	September 22, 1992
470-1918	05/95
34	November 17, 1992
470-2608	7/90
36-37	February 23, 1993
470-2883	7/92
470-1970	7/85
38, 39	July 5, 1995
470-2049	04/94
470-1919	5/95

#### **Additional Information**

Obtain forms 470-3880, 4709-3901, and 588-0298 (470-3194) through the ICAR system. Obtain forms 588-0032 and 588-0037 from the Bureau of Vital Records in the Department of Public Health. Print reference card RC-0068 from the on-line manual as needed.

Destroy all remaining supplies of the following forms, which are now obsolete:

- ♦ 470-2157, Parental Liability Contact
- ♦ 470-2871, *Information About Immediate Income Withholding*
- ♦ 470-2155, *Parental Liability Reminder*
- ♦ 470-2159, Zero Liability Notice
- ♦ 470-2217, Parental Liability Notice
- ♦ 470-2186, Dispositional Order for Parental Liability and Medical Support
- ♦ 470-2167, Foster Care Noncooperation Notice
- ♦ 470-2164, *Notice of Assignment*
- ◆ CS-3104-0, Assignment of Support Payments: Foster Care
- **♦** 470-1923, *Notice of Support (NPA)*
- ♦ 470-2049, Certification of Matter to District Court

Other forms previously included in this Appendix remain in use.

Refer questions about this general letter to your regional collections administrator.